

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF PENNSYLVANIA

10-7234

PAUL ANTHONY COHEN
1287 Court Welfare Rd
Leesport PA 19507
(In the space above enter the full name(s) of the plaintiff(s).)

- against -

George Wagner
Berks City Commissioners
Berks City Prison
1287 County Welfare Rd
Leesport Pa 19533
SHIRLEY SMEDL. Secretary of Inmates

COMPLAINT

under the
Civil Rights Act, 42 U.S.C. § 1983
(Prisoner Complaint)

Jury Trial: ☐ Yes ☐ No
(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name Paul ANTHONY COHEN
ID # 0001 1938
Current Institution BERKS COUNTY JAIL
Address 1287 County Welfare Rd Leesport
Pa 19533

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name George Wagner Shield # _____
Where Currently Employed Berks County Jail
Address 1287 County Welfare Rd
Leesport PA 19533

Defendant No. 2 Name Berks County Comm. Shield # _____
Where Currently Employed Berks County PA
Address 633 Court St Reading PA
19601

Defendant No. 3 Name Berks County Prison Shield # _____
Where Currently Employed Same
Address 1287 County Welfare Rd.
Leesport Pa 19533

Defendant No. 4 Name Shirley Smedl Shield # _____
Where Currently Employed Secretary of Prisons
Address 2520 Lisburn Rd. Po Box 598
Camp Hill, PA. 17001-0598

Defendant No. 5 Name Correctional Officer "Dew" Shield # _____
Where Currently Employed Berks County Jail System
Address 1287 County Welfare Rd
Leesport PA 19533

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur? Berks
County Jail

B. Where in the institution did the events giving rise to your claim(s) occur? G Block
Cell 218

C. What date and approximate time did the events giving rise to your claim(s) occur? 9.21
2010 7pm

What
happened
to you?

D. Facts: I was looking out of the hole in my door, inmate Nelson threw hot water in my face from 216 To The right of my cell. Causing burns on my face. I immediately called the officer. I was taken to medical, I was treated for burns and released. At the time I didn't know it was inmate Nelson. However he admitted it saying, "I was just a joke," I told the officer it was inmate ^{him} Nelson. Thusly my 8th Amendment Rights were clearly violated.

Who
did
what?

Was
anyone
else
involved?

Who else
saw what
happened?

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

BURNS ON MY FACE
I was given some ice and some
creme for my face

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

Additional Information:

I came to protective custody to be safe & secure from assault. Several months prior I went to the ICC meeting and reported inmate Nelson had beaten inmate Benno. I also told officer New repeatedly about inmate Nelson's constant harassment of me. The officers allowed inmate Nelson to stay in the cell - (2166). This substantiates the direct indifference factor. Several other officers witnessed this harassment. Immediately after the assault inmate Nelson was allowed to continue to dwell in 216. I wrote a grievance identifying inmate Nelson as the person who assaulted me. I never received a response as of NOVEMBER 10, 2010. I also identified inmate Nelson as the one who assaulted me to the officer on duty immediately after the assault. No action was taken against inmate Nelson for the assault.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☒ No ☐

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Berks County Jail

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes ☒ No ☐ Do Not Know ☐

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes ☐ No ☐ Do Not Know ☒

If YES, which claim(s)?

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes ☒ No ☐

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes ☐ No ☐

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

I sent a grievance in

1. Which claim(s) in this complaint did you grieve? The fact inmate Nelson was not disciplined, no windows in doors.
2. What was the result, if any? NONE, The grievance disappeared. I never received a response
3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. Counselor Nate Tolome
The grievance is the highest level

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: _____

X X X

2. If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any: _____

X X X

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. _____

X X X

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). Positive damages \$10,000.00 each dependant for burns received, the potential for disaster, and the refusal to remedy the situation by putting windows in the doors like every other block in the prison. Compensatory damages 5,000.00 each dependant. I wrote previously about the problems with no windows

nor am I the first inmate to have problems of this nature. The Eighth Amendment guarantees I have the right to be free from violent assaults from other inmates. I would like to be immediately paroled. A permanent injunction against Beck's City Jail. I fear for my personal safety. I am currently 5 months past my parole date. Had I been paroled on time this would never have happened. I want an admission my rights were violated.

Additional relief attached.

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ___ No ☒

B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ___ No ___

If NO, give the approximate date of disposition _____

Assault

relief

damages

Punitive damages in the amount of 10,000.00. against each defendant. Officials failed to protect plaintiff by refusing to put windows in the doors. The risk of serious harm is dire. I also complained many times about the inmate harassing me. There is a continuing threat of future attacks of this nature

compensatory damages in the amount of 5,000.00

For Pain and Suffering, (Defendants), Inmate Nelson had evil intent and attempted to harm me in a most serious manner.

nominal damages in the amount of

An admission that my civil rights were violated.

All costs incurred by plaintiff in this matter.

A jury trial on all issues trial by jury.

Any relief this court deems just, proper, and equitable.

Dated: 12-19-2010

Respectfully Submitted,

Paul A Cohen
1287 County Welfare Rd
Leesport Pa 19533

Paul Coh
Plaintiff

Damages Continued.

Nominal Damages for violating my right to be Safe & Secure from inmate assaults.

A Jury trial on all issues triable by Jury.

Plaintiffs costs in suit, including filing fees.

Any additional relief this court deems just, proper, and equitable.

Dated 12.7.2010

Respectfully Submitted.

Assault

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

C. Have you filed other lawsuits in state or federal court?

Yes ☒ No ☐

D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Paul A Cohen
 Defendants John Rosh, New Person Center

2. Court (if federal court, name the district; if state court, name the county) Berks

3. Docket or Index number 10 - 18856

4. Name of Judge assigned to your case Jeffrey-Sprecher

5. Approximate date of filing lawsuit OCT 4 2010. 2010

6. Is the case still pending? Yes ☒ No ☐

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 18 day of November, 2010.

Signature of Plaintiff

Paul A Cohen

Inmate Number

0001938

Institution Address

Berks County Jail
System - 1287 County
Welfare Rd
Leesport PA 19533

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 7 day of Dec, 20 10, I am delivering this complaint to prison authorities to be mailed to the Clerk's Office of the United States District Court for the Eastern District of Pennsylvania.

Signature of Plaintiff:

Paul Ceh

Damages Continued.

Nominal Damages for violating my right to be Safe & Secure from inmate assaults.

A Jury trial on all issues triable by Jury.

Plaintiffs Costs in suit, including filing fees.

Any additional relief this court deems just, proper, and equitable.

Dated 12.6.2010

Respectfully Submitted.

All defendants are sued jointly and severly

Damages Continued.

Nominal Damages for violating my right to be Safe & Secure from inmate assaults.

A Jury trial on all issues triable by Jury.

Plaintiffs Costs in suit, including filing fees.

Any additional relief this court deems just, proper, and equitable.

Dated 12.6.2010

Respectfully Submitted.

line to see the Doctor.

There is a distinct law against this exact thing. "Direct indifference due to changing or ignoring a doctors previously prescribed medication or treatment. I don't need all of the headaches that entitles. Please check my records. I have severe degenerative Disc Disease. The doctor told me she and I have the same thing right down to the #10 to be fused together through surgery. I had an ultrasound done here. I suggest you check his report also. He said my muscles are in severe spasm. So did the doctors upstate. As far as I know Robaxin is not habit forming - no narcotic. My EKG is normal, blood levels are good, livers fine, B.P & Pulse are good. I said something Jesse didn't like, (I guess) I wasn't serious, He just took it that way. My meds were basically the same for about a year until that. Please put me back on my Robaxin.

Paul

BERKS COUNTY PRISON

INMATE COMMUNICATION FORM

FROM: Paul Cohen BCP# 2011938 DATE: 11-19-2010HOUSING ASSIGNMENT 6218 WORK ASSIGNMENT N

TO: ☐ WARDEN ☐ ASS'T WARDEN ☐ DEPUTY WARDEN
 CHOOSE ☐ CHAPLAIN ☐ KITCHEN SUPERVISOR ☐ COMMISSARY
 ONE
 ONLY ☐ DIRECTOR OF TREATMENT (Classification, Assignments, Programs)
☐ DIRECTOR OF RECORDS (Criminal Case Records, Inmate Accounts)
☒ SHIFT COMMANDER/LT. CASTRO

NOV 22 '10 AM 9:15

COMMUNICATION (Write legibly, avoid abbreviations. Words which are unclear or contain demeaning language, threats, or profanity will not be addressed). ONLY CASTRO

I wrote a grievance when inmate Nelson
 threw hot water in my face and was not
 disciplined. Did a response ever get sent to
 me. I didn't receive one. This was on 9-22 or
 23 or 24 somewhere in there

NOTE: Writing in "response section will result in form
 being filed unanswered

Inmate Signature



RESPONSE

DATE 11/22/10 STAFF MEMBER Lt Castro

A response was sent to you. I will forward this to treatment so that
 they may provide you with a copy.

cc: Text

209-REC-8 (Rev. 4/92)

Original-Treatment File

Canary-Return to inmate with response



SEP 17 '10 AM 10:14

**BERKS COUNTY PRISON
INMATE GRIEVANCE FORM**

Inmate Name Paul Cohen 9-17-2010 BCP# 20011938 Cell 6218

Instructions: Refer to the inmate handbook for information on the inmate grievance system.

Constituent Services Officer Use Only

- ☐ Does not fit criteria for an emergency/sensitive grievance ☐ Form is incomplete ☐ Resubmit on proper form
- ☐ Lacks details ☐ Must be completed in English

Statement: Detail the act or condition which caused this grievance. (Be specific; list all dates, times, locations and witnesses.)

9-15-2010. Last week I was locked in because an inmate locked my cell before I got to it. Offc Dew did it. Offc Dew came out of his cell talking to me. I told him leave me alone off dew took my rec I literally only said leave me alone, I tried to tell offc dew this. He angrily said "I would be joining my old cellmate Gaydos. I am singled out by this offc. He is angry all the time. Last week he screamed in my face about locking our cell doors. He did this in full view of the entire block.

Received by Constituent Services Officer _____

Signature

Date

Referred by Constituent Services Officer to _____

Name

Dept.

Date

Grievance Response: You claim that this officer singled you out, but you have only ever received one visit action from him. You received the visit action for talking when you shouldn't have been. That is not a grievable issue.

Grievance Answered By: Lt. Castro

Date 9/20/10

Constituent Services Officer Use Only

Grievance # _____

Date Posted _____

Original: Treatment File

Canary: Return to inmate with response

FORM# REC120

Publisher/LI/Public/Forms/Inmate Grievance Form